

Trends In Amplification

From the Editor

In the last issue, the importance of measuring sound levels in the ear with probe microphone equipment was discussed. However, those routinely fitting hearing aids realize that providing appropriate real-ear amplification to listeners with hearing impairment only begins the process of rehabilitation. How well does the listener perform with, and how much benefit is received from, amplification? Does the hearing aid work as expected in real-world listening situations? Is the listener satisfied with the amplification? If not, in what situations does the hearing aid fail to live up to expectations? These are a few of the questions we may need to answer for the hearing aid wearer, for ourselves as the fitting clinician, and increasingly, for third-party payers. Outcome measures are increasingly used after fitting in an attempt to answer these questions. This, however, creates a whole new set of questions related to the appropriate selection of outcome measure(s). Fortunately, in this issue of *Trends in Amplification* we have two authors who have performed extensive research in the area of outcome measures who can provide some insight into the sometimes puzzling world of selection of appropriate outcome measures for adult hearing aid wearers.

In our first article, Stuart Gatehouse, PhD, provides some insight into the application of a few of the more popular self-report outcome measures. In this article, Dr. Gatehouse also stresses the importance of an evidence-based approach to health care, which is becoming increasingly popular throughout the world. Dr. Gatehouse has been the Scientist-in-Charge at the MRC Institute of Hearing Research, Southern General Hospital, and at the Royal Infirmary, Glasgow since 1982. In this position he has been, and continues to be, responsible for all scientific aspects of the section's activities (as opposed to those directly concerned with clinical management), with a substantial input to the institute's multicenter program, and the generation and execution of many local studies, both those conducted within the Scottish

Section of the Institute of Hearing Research and in collaboration with colleagues from other health service and university departments.

I am sure most readers are already familiar with Dr. Gatehouse through his work: 1) in the area of outcome measures including the development of the Glasgow Hearing Aid Benefit Profile (GHABP); 2) in the area of acclimatization to amplified speech; or, 3) from his many other areas of interest, including work in compression and in spatial hearing. Dr. Gatehouse has published more than 100 articles in the past 30 years and has worked primarily in the area of hearing for the last 25 years. He serves on numerous editorial, scientific, and advisory boards and has been invited to present his research findings throughout the world.

In our second article, Greg Flamme, PhD, shares some of his recent research findings in which characteristics of the tests used to examine hearing aid outcome are examined. This study certainly offers some interesting insights as to the contaminating effects of method-related bias on the outcome measures we measure as clinicians and researchers. It seems that in the presence of the excellent face validity of several of our measures, we may sometimes forget to ask the most basic questions such as "Does the test score actually represent performance in the domain, or area, that the tester wishes to explore?" Dr. Flamme completed his PhD in 2000 and is currently an assistant professor at the University of Iowa. His principal research interests are in the development and evaluation of clinical auditory tests, hearing impairment as a public health problem, and the evaluation of rehabilitative approaches to reducing this problem.

The reader may note that we are continuing the evolution of this journal by occasionally deviating from our traditional format of a single comprehensive article. In this issue we have coupled an overview of a topic area (in this case outcome measures) with recent research on this topic by a second author. We hope you enjoy this occasional deviation in format.

Todd A. Ricketts, PhD
Editor-in-Chief